



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY
(VERIFICATION)**

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

+ TXD040933012

INSTALLATION ADDRESS

BROWN RENTAL EQUIPMENT COMPANY
ALLAN DENNIS SAFETY
621 S FRWY
FORT WORTH TX 76104
411 EXCHANGE DR
ARLINGTON 76011

DATA CHANGES

EPA IDENTIFICATION NUMBER/C101=12

TXD 4 4 9 3 3 0 1 2

TWC #/C116=6

PREPARER

A.L. 5-24-88

DATE MD 8/1/88

Facility Name/C104=40

✓ BROWN RENTAL EQUIP

Mailing Address/C106=30

County/C114=3

City/C107=25

ST/C108=2

Zip/C109=5

Facility Contact Person/C105=30

Ownership Code/C102

Location Address/C110=30

ST Dist/C115=2

City/C111=25

ST/C2=2

Zip/C109=5

Owner's Name/C1503=40

GEN TRN YSD UIC

C1105

C305

Other

Other

Telephone/C113=10

Waste Codes to be added/C2701

Waste Codes to be deleted/C2701

Process Codes- Add - Delete - Change

C1801=3

C1802=13

C1803=1 C1804=1

C1801=3

C1802=13

C1803=1 C1804=1

C1801=3

C1802=13

C1803=1 C1804=1

Other Coding as necessary

Entered by:

8/B 10-6-88
RF

Date Entered: 6-3-88

QC: A.L. 6-8-88 File Code:

7-29-87 DA

Form Approved. OMB No. 2050-0028. Expires 9-30-88.
GSA No. 0246-EPA-07

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

United States Environmental Protection Agency
Washington, DC 20460

Notification of Hazardous Waste Activity

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

For Official Use Only

Comments

C
C

Installation's EPA ID Number

Approved

Date Received
(yr. mo. day)C
F

TXD040933012

T/A C
1439/
TARRANT

I. Name of Installation

BROWN RENTAL EQUIPMENT COMPANY

II. Installation Mailing Address

Street or P.O. Box

C
3

621 SOUTH FREEWAY

City or Town

State

ZIP Code

C
4

FORT WORTH

TX 76104

III. Location of Installation

Street or Route Number

C
5

411 EXCHANGE DRIVE

City or Town

State

ZIP Code

C
6

ARLINGTON

TX 76011

IV. Installation Contact

Name and Title (last, first, and job title)

Phone Number (area code and number)

C
2

ALLAR DENNIS SAFETY 8173324191

V. Ownership

A. Name of Installation's Legal Owner

B. Type of Ownership (enter code)

C
R

GARY BROWN

P

VI. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity

- ☐ 1a. Generator ☒ 1b. Less than 1,000 kg/mo.
- ☐ 2. Transporter
- ☐ 3. Treater/Storer/Disposer
- ☐ 4. Underground Injection
- ☐ 5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below)
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketer
- ☐ c. Burner

B. Used Oil Fuel Activities

- ☐ 6. Off-Specification Used Oil Fuel (enter 'X' and mark appropriate boxes below)
- ☒ a. Generator Marketing to Burner
- ☐ b. Other Marketer
- ☐ c. Burner
- ☐ 7. Specification Used Oil Fuel Marketer (for On-site Burner) Who First Claims the Oil Meets the Specification

VII. Waste Fuel Burning: Type of Combustion Device (enter 'X' in all appropriate boxes to indicate type of combustion device(s) in which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.)

☐ A. Utility Boiler☐ B. Industrial Boiler☐ C. Industrial Furnace

VIII. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es))

☐ A. Air ☐ B. Rail ☐ C. Highway ☐ D. Water ☐ E. Other (specify)

IX. First or Subsequent Notification

Mark 'X' in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA ID Number in the space provided below.



A. First Notification

☒ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

ID — For Official Use Only													
C												T/A	C
W													1

X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
D001					
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54

E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☒ 1. Ignitable
(D001)

☐ 2. Corrosive
(D002)

☐ 3. Reactive
(D003)

☐ 4. Toxic
(D000)

XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature

Dennis Allar

Name and Official Title (type or print)

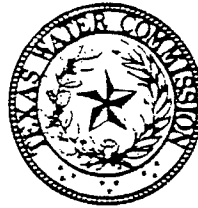
DENNIS ALLAR
SAFETY COORDINATOR

Date Signed

7/7/87

TEXAS WATER COMMISSION

Notification of Municipal
Hazardous Waste Activity



Complete and return to:

Registration & Classification Unit
P.O. Box 13087, Capitol Station
Austin, Texas 78711-3087

Please type or print clearly

A. Name and Mailing Address

BROWN RENTAL EQUIPMENT COMPANY
621 SOUTH FREEWAY
City FORT WORTH State TX Zip 76104
EPA I.D. # _____

B. Site Address or Location

411 EXCHANGE DRIVE
ARLINGTON, TX 76011
County TARRANT

C. Contact Person DENNIS ALLAR Phone 817-332-4191

D. Description of business activities: CONSTRUCTION EQUIPMENT RENTAL

E. Hazardous waste activities—(Check appropriate boxes)

☒ Generator ☐ Treatment, storage, or disposal ☐ Transporter ☐ Recycler

F. Hazardous waste(s) generated—by EPA hazardous waste number(s)

See 40 CFR Part 261 for hazardous waste numbers

D, O, C, I _____

G. Total amount of hazardous wastes generated per month (Check one)

☒ Less than 100 kilograms ☐ 100—1,000 kilograms ☐ more than 1,000 kilograms

Note: 1 kilogram = 2.2 pounds and one gallon of water weighs approx. 3.8 kilograms

H. Approximate number of waste shipments each year: 4

I. Onsite hazardous waste management activities (Check all appropriate boxes)

Storage: ☒ in drums; ☒ in partially or fully below-ground tank(s)

☐ in above ground tanks ☐ other (describe) _____

Processing: ☐ (describe) _____

Disposal: ☐ (describe) _____

J. I certify the information herein is complete and accurate to the best of my knowledge.

Signature Dennis Allar Date 7/7/87